



NORTH CAROLINA STATE ETHICS COMMISSION
2016 STATEMENT OF ECONOMIC INTEREST

NO CHANGE FORM

CONTACT INFORMATION

This contact information page will not be available on the Commission's website, but it is a public document.

919-814-3600

www.ethicscommission.nc.gov

SEND YOUR SIGNED ORIGINAL TO:

STATE ETHICS COMMISSION

BY MAIL AT:
1324 MAIL SERVICE CENTER
RALEIGH, NC 27699-1324

OFFICE LOCATION:
CAPEHART CROCKER HOUSE
424 N. BLOUNT ST.
RALEIGH, NC 27601-1010

FOR ETHICS COMMISSION USE ONLY

Date Received:

____ Checked for completion

____ Scanned ____ Date

**THIS ENTIRE FORM MUST BE
COMPLETED TO FULFILL
YOUR SEI FILING
OBLIGATION**

FILER'S NAME (FIRST, MIDDLE, LAST)

Prefix	First Name	Middle Name	Last Name	Suffix

MAILING ADDRESS (REQUIRED)

Address	City	State	Zip

DAYTIME PHONE NUMBER (REQUIRED)

ALTERNATE PHONE NUMBER

E-MAIL ADDRESS (REQUIRED)

HOME ADDRESS:

PROVIDE YOUR HOME ADDRESS ONLY IF YOU ARE HOLDING OR SEEKING AN ELECTED OFFICE WITH A RESIDENCY REQUIREMENT. This requirement does not apply to Judicial Officers.

Judicial officer means Justice or Judge of the General Court of Justice, District Attorney, or Clerk of Court, or any individual elected or appointed to any of these positions prior to taking office.

☐ Same as Mailing Address

Address	City	State	Zip

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Entered in DB _____ by _____

FILER'S NAME (FIRST, MIDDLE, LAST)

Prefix	First Name	Middle Name	Last Name	Suffix

REASON FOR FILING (SELECT ALL THAT APPLY)

☐ STATE GOVERNMENT JOB (Please specify the agency for which you work or are being considered)

☐ BOARD/COMMISSION (Please list complete name of all State boards on which you are serving or are being considered)

☐ JUDICIAL OFFICER (Please specify the office you hold)

☐ LEGISLATOR (Please specify House or Senate)

AFFIRMATION

I affirm that the information provided in this Statement of Economic Interest and any attachments hereto are true, complete, and accurate to the best of my knowledge and belief.

I also certify that I have not transferred, and will not transfer, any asset, interest, or property for the purpose of concealing it from disclosure while retaining an equitable interest.

I understand that my Statement of Economic Interest and any attachments or supplements thereto (with the exception of the Confidential Form regarding Unemancipated Children) are public record.

I acknowledge that I have read and understand N.C.G.S. 138A-26 regarding concealing or failing to disclose material information and N.C.G.S. 138A-27 regarding providing false information:

§ 138A-26. Concealing or failing to disclose material information.

A filing person who knowingly conceals or knowingly fails to disclose information that is required to be disclosed on a statement of economic interest under this Article shall be guilty of a Class 1 misdemeanor and shall be subject to disciplinary action under G.S. 138A-45.

§ 138A-27. Penalty for false information.

A filing person who provides false information on a statement of economic interest as required under this Article knowing that the information is false is guilty of a Class H felony and shall be subject to disciplinary action under G.S. 138A-45.

I hereby affirm that I have reviewed my most recently filed 2015 Statement of Economic Interest and that as of December 31, 2015, my responses continue to be true, correct, and complete to the best of my knowledge and belief.

☐ I Agree

Signature

Date

Printed Name

Submit SIGNED, ORIGINAL documents only. Do not fax or mail this form.

This entire document is a public record.



NORTH CAROLINA STATE ETHICS COMMISSION

2016 Real Estate Disclosure Form

**ALL MPO AND RPO TAC MEMBERS MUST FILE
THIS FORM WITH THE 2016 SEI**

FOR ETHICS COMMISSION USE
ONLY

Date Received:

____ Checked for completion
____ Scanned ____ Date
Entered in DB ____ by ____

Name of Person Filing Real Estate Disclosure Form				
Prefix	First Name	Middle Name	Last Name	Suffix
Name of MPO or RPO				
Please list all real estate (including real estate listed on question 1 of the Statement of Economic Interest) owned wholly or in part by you, a member of your <i>extended family</i> ⁱ , or a <i>business with which you are associated</i> ⁱⁱ within the jurisdiction of the MPO or RPO on which you are serving.				
Name of Owner of Real Estate		Location by City		Location by County

This entire document and any attachments are public record.

ⁱ "Extended family" includes your spouse, lineal descendants, lineal ascendants, siblings, spouse's lineal descendants, spouse's lineal ascendants, spouse's siblings, and the spouse of any of these individuals.

ⁱⁱ "Business with which associated" includes any for profit business in which you are or any member of your immediate family (see definition on Statement of Economic Interest) is:

- an employee, director, officer, partner, proprietor; **or**
- a member or manager of a limited liability company; **or**
- an owner of an interest of \$10,000 or more in the business or 5% of the business whichever is less; **or**
- a registered lobbyist.

This entire document is a public record.

AFFIRMATION

I affirm that the information provided in this Real Estate Disclosure Form and any attachments hereto are true, complete, and accurate to the best of my knowledge and belief.

I also certify that I have not transferred, and will not transfer, any asset, interest, or property for the purpose of concealing it from disclosure while retaining an equitable interest.

I understand that my Real Estate Disclosure Form and any attachments or supplements thereto are public record.

I acknowledge that I have read and understand the applicable violation provision set out below:

(MPO) § 136-200.2(j). Violations

An MPO member who knowingly conceals or knowingly fails to disclose information that is required to be disclosed on a required filing under this Article shall be guilty of a Class 1 misdemeanor and an MPO member who provides false information on a required filing knowing that the information is false is guilty of a Class H felony. (2013-156, s. 1(b).)

(RPO) § 136-211(j). Violations

An RPO member who knowingly conceals or knowingly fails to disclose information that is required to be disclosed on a required filing under this Article shall be guilty of a Class 1 misdemeanor and an RPO member who provides false information on a required filing knowing that the information is false is guilty of a Class H felony. (2013-156, s. 2(b).)

☐ I Agree

Signature

Printed Name

Date

**SUBMIT SIGNED, ORIGINAL DOCUMENTS
ONLY. DO NOT FAX OR EMAIL THIS FORM**

For assistance please call: 919-814-3600 or e-mail SEI@doa.nc.gov

This entire document and any attachments are public record.

This entire document is a public record.